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CONFIRMATION NO. 2339

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|--|---|-------------------------------|---|---|--------------------------------|
| SERIAL NUMBER 09/990,871 | FILING OR 371(c) DATE 11/16/2001 RULE | CLASS 379 | GROUP ART UNIT 2614 | ATTORNEY DOCKET NO. 0116123-011 | |
| APPLICANTS Syed Abdulkader El Shariff Bin Mohamed Alhadad, Indialantic, FL; Susan Wagner, Riverwoods, IL; | | | | | |
| ** CONTINUING DATA ***** This application is a CIP of 09/645,920 08/24/2000 ABN and claims benefit of 60/252,033 11/20/2000 | | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 12/03/2001 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____ | | STATE OR COUNTRY FL | SHEETS DRAWING 14 | TOTAL CLAIMS 20 | INDEPENDENT CLAIMS 2 |
| ADDRESS 24573 | | | | | |
| TITLE AUTOMATED BUSINESS FORM INFORMATION AQUISITION SYSTEM | | | | | |
| FILING FEE RECEIVED 435 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |